Trends In Amplification

From the Editor

In an issue last year, Stuart Gatehouse, PhD and Greg Flamme, PhD provided excellent discussions of the general application of a few of the more popular self-report outcome measures and statistical treatment of outcome measure characteristics. In this issue, Robert M. Travnor, EdD and Alice Holmes, PhD provide a very different view of determination of hearing aid outcome. They propose that patients' reactions to and success with hearing aids may be somewhat predictable based on personality factors. Specifically, they contend that knowing a patient's "personal style" and understanding how this may interact with the clinician's own personality may enhance the hearing aid fitting and orientation process. As these authors quite logically state, "The more we know about our patients and ourselves before we begin, the better our chances of success." The impact of personality factors on hearing aid outcome has enjoyed increasing popularity in recent hearing aid literature. This interest is due in part to data suggesting that personality differences in patients may account for a significant amount of the variance demonstrated within outcome measures.

Dr. Robert M. Traynor is a private practice audiologist in Greeley, Colorado. He is also the International Audiology Consultant for Bernafon AG, Bern, Switzerland and an Adjunct Professor of Audiology at the University of Florida in Gainesville. He has taught audiology for over 25 years and

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Dr. Alice Holmes is an Associate Professor of Audiology and Graduate Coordinator of the Department of Communication Disorders at the University of Florida in Gainesville. She is also the coordinator for both the on and off campus Doctor of Audiology programs. Her research, teaching, and clinical work has focused on rehabilitative techniques, including the use of amplification and cochlear implants for hearing loss. She has been the audiology coordinator at the University of Florida since 1985, joining the faculty in 1991. Dr. Holmes is the Past President of the Academy of Rehabilitative Audiology and newsletter editor for the International Colloquium of Rehabilitative Audiology.

In this issue, Dr. Traynor and Dr. Holmes discuss clinical tools that can be used to assess patient personality. While useful information in its own right, these authors go on to discuss the clinical implications of personal style through informative examples. The discussion of personal style can provide a theoretical basis for what we as audiologists have sometimes considered part of the "art" of our profession. I would offer that perhaps much of the "art" of audiology is simply creative application of science. Consequently, discussions of personal style provide an excellent means of "demystifying" the "art of audiology."

Todd A. Ricketts, PhD Editor-in-Chief